FIELD TRIAGE DECISION SCHEME: THE NATIONAL TRAUMA TRIAGE PROTOCOL

Measure vital signs and level of consciousness

Glasgow Coma Scale Systolic blood pressure < 14 or < 90 mmHg or

Respiratory rate

< 10 or > 29 breaths/minute (< 20 in infant < one year)

YES

YES

YES

YES

Take to a trauma center. Steps 1 and 2 attempt to identify the most seriously injured patients. These patients should be transported preferentially to the highest level of care within the trauma system.

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Assess anatomy of injury



All penetrating injuries to head, neck, torso, and extremities proximal to elbow and knee

- Flail chest
- Two or more proximal long-bone fractures
- · Crushed, degloved, or mangled extremity
- · Amputation proximal to wrist and ankle
- · Pelvic fractures
- · Open or depressed skull fracture
- Paralysis

NO

Assess mechanism of injury and evidence of high-energy impact



Falls

- Adults: > 20 ft. (one story is equal to 10 ft.)
- Children: > 10 ft. or 2-3 times the height of the child

High-Risk Auto Crash

- Intrusion: > 12 in. occupant site; > 18 in. any site
- · Ejection (partial or complete) from automobile
- Death in same passenger compartment
- · Vehicle telemetry data consistent with high risk of injury

Auto v. Pedestrian/Bicyclist Thrown, Run Over, or with Significant (> 20 mph) Impact

Motorcycle Crash > 20 mph

NO

Assess special patient or system considerations

Age

- Older Adults: Risk of injury death increases after age 55 years
- · Children: Should be triaged preferentially to pediatric-capable trauma centers

Anticoagulation and Bleeding Disorders

Burns

- · Without other trauma mechanism: Triage to burn facility
- · With trauma mechanism: Triage to trauma center

Time Sensitive Extremity Injury

End-Stage Renal Disease Requiring Dialysis

Pregnancy > 20 Weeks

EMS Provider Judgment

NO

Transport according to protocol



appropriate trauma center, which depending on the trauma system, need not be the highest level trauma center.

Contact medical control and consider transport to a trauma center or a specific resource hospital.



